

## 15689 POSTER DISPLAY CLINICAL RESEARCH – PROSTHETICS

### Long-term quality of life after rehabilitation with implant-supported fixed complete dentures

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**Background:** The rehabilitation of edentulous arches with implant-supported fixed complete dentures (IFCDs) may solve immediate problems of stability and retention associated to conventional removable dentures. Some previous studies have shown significant improvement of quality of life (QoL) in patients treated with dental implants, yet long-term effect usually is not reported.

**Aim/Hypothesis:** This prospective study aimed at analysing the impact of oral rehabilitation with IFCDs on oral health-related QoL with up to 5 years of follow-up. We hypothesized that QoL vary as a function of time, failure occurrence and dimensions of the Oral Health Impact Profile questionnaire (OHIP-14).

**Material and Methods:** A consecutive sample of 95 patients (29 men and 66 women, mean age of 66 years old) received hybrid IFCDs at a dental school facility. QoL data were collected by using the OHIP-14 questionnaire in 4 appointments- Baseline (BL) and 1(T1), 3 (T2) and 5 years (T3) after IFCD installation. Data analyses were performed for OHIP-14 total score and for its seven domains- functional limitation, physical pain, psychological discomfort, physical incapacity, psychological incapacity, social incapacity, and handicap. Comparison of QoL over time was analysed by Friedman test. QoL in patients who presented or not mechanical complications was analysed comparing the initial and final OHIP-14 scores between groups using Mann-Whitney test and intra-groups using Wilcoxon test. The significance level was 0.05.

**Results:** In the sample, 15 out of 95 patients had mechanical complications; 78, 52 and 23 patients answered the OHIP-14 questionnaire after 1, 3 and 5 years, respectively (mean score- BL =  $20.3 \pm 13.2$ , T1 =  $3.0 \pm 5.0$ , T2 =  $2.5 \pm 3.2$ , T3 =  $2.0 \pm 2.6$ ). There was a significant difference between BL and T1 ( $P = 0.001$ ) that remained constant until T3 even for patients with mechanical complications. No statistical difference was found between groups with and without complications. The seven OHIP-14 domains showed the same pattern, except for physical pain and social incapacity, which did not show significant difference between BL and T1 ( $P = 0.061$  and  $0.246$ , respectively).

**Conclusion and Clinical Implications:** Patients rehabilitated with IFCDs reported a significant improvement in functional and psychological aspects of oral health-related QoL, even those who had mechanical complications. After treatment, the satisfaction levels remained constant over time.